Attorney's Docket No	PATENT
COMBINED DECLARA	TION AND POWER OF ATTORNEY
	TAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, NUATION OR C-I-P)
As a below named inventor, I hereby declare	that:
TYPE O	OF DECLARATION
This declaration is of the following type: (ch	eck one applicable item below)
<ul><li>✓ original</li><li>✓ design</li><li>✓ supplemental</li></ul>	
NOTE: If the declaration is for an International Application <u>not</u> check next item; check appropriate one of last three items.	being filed as a divisional, continuation or continuation-in-part application, do
national stage of PCT	
NOTE: if one of the following 3 items apply, then complete and I-P.	d also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR C-
divisional continuation continuation-in-part (C-I-P)	
	SHIP IDENTIFICATION  Inventors of all the claims, an explanation of the facts, including the invention was made, should be submitted.
	ventor (if only one name is listed below) or an original, listed below) of the subject matter which is claimed and
TITLE	OF INVENTION
Method and System for Displaying	Markup Language Based Pages on Handheld Devices
SPECIFICAT	TION IDENTIFICATION
the specification of which: (complete (a), (b)	or (c))
(a) is attached hereto. (b) was filed on as Serial No. or Express Mail No., as Serial No. and was amended on fifty (if application)	not yet known
	laration and Power of Attorney [1-1]-page 1 of 5)

the details below and make the priority claim.

NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.				
(c) was described and claimed in PCT International Application No filed on and as amended under PCT Article 19 on (if any).				
ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.				
I acknowledge the duty to disclose information  which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56  (also check the following items, if desired)				
and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and  In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.				
PRIORITY CLAIM (35 U.S.C. § 119)				
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT International application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT International application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.  (complete (d) or (e))				
(d) no such applications have been filed.				
(e) Such applications have been filed as follows.				
NOIE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter				

## A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY C UNDER 37 U	
Finland	20001573	30.06.2000	⊠ YES	NO 🗌
			☐ YES	NO 🗌
			☐ YES	NO 🗌
			YES	NO 🗌
			YES	NO.
application entering the Un ADDED PAGES TO COM	filed more than 12 months from to ited States as (1) the national stage BINED DECLARATION AND P of the prior U.S. or PCT application,	, or (2) a continuation, divisional, c OWER OF ATIORNEY FOR DIV	r continuation-in-part,	then also complete
	POWER	OF ATTORNEY		
	e following attorney(s) an atent and Trademark Offic			
N	Clarence A. Green (24,622 Mark F. Harrington (31,68) anik Marcovici (42,841)	•		
	(check the foll	owing item, if applicable)		
	part of this declaration a accept and follow instruc			of the above
	Declar	ation and Power of Attorney [1-	1]-page 3 of 5)	

## SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO:

(Name and telephone number)

Mark F. Harrington

Perman & Green 425 Post Road

Fairfield, CT 06430-6232

(203) 259-1800

## DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other documents.

Full name of sole or f	irst inventor	
Arto (GIVEN NAME)	(MIDDLE INITIAL OR NAME)	<u>Lehtonen</u> FAMILY (OR LAST NAME)
Inventor's signature	alto	TO NAME AND ADDRESS OF THE PARTY OF THE PART
Date 7+4 M		_ Country of Citizenship Finland
Residence <u>Tamper</u>	e, Finiand Silakatu 20, FIN-33730 Tampe	
Full name of second j	oint inventor, if any	•
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
Inventor's signature _		
Date		Country of Citizenship
Residence		<del>-</del>
Post Office Address		

(Declaration and Power of Attorney [1-1]-page 4 of 5)

(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
_	e	CC':		
Date Residence	O	Country of Citizenship		
Post Office Addres	s			
CHECK PROPER	BOX(ES) FOR ANY OF THE FOLLO A PART OF THIS DECI	OWING ADDED PAGE(S) WHICH FO LARATION		
Signature f	or fourth and subsequent joint invento	rs. Number of pages added		
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Signature f		nnot be reached by person authorised t		
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	e for signature by one joint inventor or representative cannot be appointed in			
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	es to combined declaration and power t (C-I-P) application. Number of pages as	r of attorney for divisional, continuation dded		
	•••			
Authorizati	on of attorney(s) to accept and follow	instructions from representative.		
(If no further pages following item:)	form a part of this Declaration, then en	d this Declaration with this page and chec		
	⊠ This o	declaration ends with this page.		
	(Declaratio	on and Power of Attorney [1-1]-page 5 of 5)		

Full name of third joint inventor, if any